

PART B—ISSUE FEE TRANSMITTAL

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JUN 26 2001

Box ISSUE FEE
Assistant Commissioner for Patents
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(Signature)

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/451.080	11/30/99	015	SPECTOR, D	2873 03/26/01
First Named Applicant OHMORI,		35 USC 154(b) term ext.	=	0 Days.

TITLE OF INVENTION LENS OPTICAL SYSTEM

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
0 024060-114	359-733.000	E06	UTILITY	NO	\$1240.00	06/26/01

Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 BURNS, DOANE, SWECKER &
MATHIS, LLP
2 _____
3 _____

ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE MINOLTA CO., LTD.

(B) RESIDENCE: (CITY & STATE OR COUNTRY) OSAKA-SHI, OSAKA, JAPAN

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual corporation or other private group entity government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

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1 COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

Authorized Signature William C. Bourne RN 3088, Jr.
Laton N. Mandros, RN 22,124

(Date)
6-26-01

06/27/2001 SMINASS2 00000027 09451080

01 FC:142 1240.00 0P

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